

REPORT OF O

SECTION A

TOTALS

1	DATE							
2	TIME							
3	# OF PLAYERS							
4	REGULAR GAME SALES (INCLUDING ADMISSION SALES) \$							
5	SPECIAL GAME SALES \$							
6	50/50 BINGO GAME SALES \$							
7	PROGRESSIVE GAME SALES \$							
8	MULTI-COLOR GAME SALES \$							
9	GROSS RECEIPTS (ADD LINES 4 THROUGH 8)							
10	REGULAR GAME PAYOUT \$							
11	SPECIAL GAME PAYOUT \$							
12	50/50 BINGO GAME PAYOUT \$							
13	PROGRESSIVE JACKPOT (IF AWARDED) \$							
14	PROGRESSIVE CONSOLATION PRIZE \$							
15	MULTI-COLOR PAYOUT \$							
16	TOTAL PAYOUT AWARDED \$ (ADD LINES 10 THROUGH 15)							
17	RENTAL FEE \$							

18	SUPPLIES \$			
19	OTHER \$			
20	TOTAL EXPENSES (ADD LINES 10 THROUGH 15 AND 17 THROUGH 19)			
21	NET PROCEEDS (LINE 9 MINUS LINE 20)			
22	PROGRESSIVE OCCASION NUMBER			
23	CARRYOVER TO NEXT OCCASION			

SECTION C

SCHEDULE OF EXPENSES

IF ADDITIONAL SPACE IS REQUIRED, ATTACH A SEPARATE SHEET OF PAPER

DATE	DESCRIPTION OF USE & CHECK NUMBER	AMOUNT

SECTION D

UTILIZATION OF NET PROCEEDS

IF ADDITIONAL SPACE IS REQUIRED, ATTACH A SEPARATE SHEET OF PAPER

DATE	DESCRIPTION OF USE & CHECK NUMBER	AMOUNT

SECTION E

BANK NAME AND ADDRESS WHERE BALANCE IS DEPOSITED

ACCOUNT NUMBER

NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR USE OF PROCEEDS

SECTION F

I CERTIFY THAT ALL STATEMENTS ON THIS REPORT OF OPERATIONS ARE TRUE, ACCURATE AND COMPLETE FOR THE DATE ON WHICH I WAS THE MEMBER IN CHARGE. I AM AWARE THAT IF ANY OF THE FOREGOING STATEMENTS ARE WILLFULLY FALSE, I AM SUBJECT TO PUNISHMENT.

OCCASION	MEMBER IN CHARGE	ADDRESS	CITY	SIGNATURE
DATE				
1				
2				
3				
4				
5				
6				

SECTION G

ATTACH THE NAMES, AGE, ADDRESSES, AND TELEPHONE NUMBER OF ALL MEMBERS CONDUCTING OR ASSISTING IN THE CONDUCT FOR EACH OCCASION.

I CERTIFY THAT I HAVE REVIEWED THIS REPORT AND THAT THE INFORMATION ON THIS REPORT OF OPERATIONS IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT IF ANY OF THE FOREGOING STATEMENTS ARE WILLFULLY FALSE, I AM SUBJECT TO PUNISHMENT .

SWORN AND SUBSCRIBED BEFORE ME THIS

DAY OF _____ *19* _____

NOTARY PUBLIC